SPORTS TOURNAMENT SPECIAL EVENT PERMIT APPLICATION

Initial



Tournament Location:		_Tournament Date	es: _			
Tournament Name:Years Held in Idaho Falls:						
Tournament Location:						
Park:			Numbe	er of Fields:		
Park:			Numbe	er of Fields:		
Brief Description of Tournament:						
Tournament Category						
☐ Co-Ed Softball	☐ Girls Fast Pitch Softball	☐ Cal-Ri _l	pkin		Babe Ruth	
☐ Men's Softball	☐ Majors/Minors Basebal	l □ Idaho	Select		Idaho Elite	
☐ Basketball	☐ Football	☐ Rugby	•		Lacrosse	
☐ AYSO Soccer	☐ BYSL Soccer	☐ Latino	Futbol		Adult Soccer	
□ Other:						
Tournament Director Info						
Tournament Director:		Sponsori	ng Orga	anization: _		
Contact's Phone: ()		_ Email: _				
Pertinent Questions for						T
Expected Attendance:	□ 1−99	□ 100 – 49	9	□ 50	00 – 999	□ 1,000+
Have you already purchased in	surance for the event?		☐ Ye	s 🗆 No		
Are audience members going t	o be charged a fee to wa	tch?	☐ Ye	s 🗆 No		
Will your event include amplifi			☐ Ye	s 🗆 No		
Please be courteous to the neighbors that around the park or facility Will you have concessionaires (food vendors)?			☐ Ye	s 🗆 No		
 The event host assumes liab 	•	sponsible for physica	lly verify	ing each ven	dor's permits.	
-	ase a Special Event Temporary ter with business name, conta		e. We wi	ill email the li	st to Eastern Ida	ho Public Health, for their
Special Event Permit: Per I have read the entire Special Event that are associated with each sect organizer, and will comply with each sect organizer.	t Permit: Policies and Procedion. By initialing the follow	dures and understa		•		
Certificate of Insurance		In	flatable	e Structure	S	
Concessionaire/Vendor Permits and Roster			Entrance Fees & Event Parking			
Community Notification		To	Tournaments, Camps and Competition			
Signage Limitations		Initial Fa	cility R	ental Fee a	and/or Insurai	nce Waiver Requests
Portable Toilets		Initial C a	ancella	tion Policy		

Initial

Tournament Fees

Permits, Fields and Equipment	Fee	Needed/ Quantity
Special Event Permit Fee	\$50.00	✓
Refundable Deposit for ALL Special Events	\$500.00	✓
Special Event Temporary Concession Permit (1-10 Vendors)	\$50.00	
Special Event Temporary Concession Permit (11+ Vendors)	\$100.00	
Soccer Fields	\$16.00/game	
Baseball Diamonds	\$14.00/game	
Football Fields	\$14.00/game	
Mound Building	\$150.00/field	
Fencing (Up to 200')	\$100.00	
Additional Fencing Beyond 200'	\$.20/ft.	
Candle Sticks(\$50.00 replacement fee)	Free	
Barricades (\$300.00 replacement fee)	Free	
Bleachers	\$40.00 ea.	

^{*}The \$500.00 deposit is a cleaning deposit as well as collateral for damages to City facilities/grounds and broken or lost equipment.

the benefits of, or otherwise subject anyone to discrimination because of the person's race, religion or national origin.

I (the signer) have read this entire Special Event Permit Application and corresponding Policies and Procedures and agree to abide by ALL rules, regulations and requirements. I have attached all required documentation to this application. I understand that failure to comply with ALL requirements, deadlines and commitments may result in termination of my permit and denial of subsequent permit requests.
I (the signer) understand that I am responsible for the conduct of the group and for the condition of the reserved park area. This permit is subjeted all Municipal Ordinances as defined by the City of Idaho Falls, in addition to all rules and regulations governing the City's Parks and Recreation Department, Lagree that during the use of the park facility, the sponsoring organization will not exclude anyone from participation in deny anyone.

Tournament Director's Printed Name	Date	Director's Signature

Special Event Permit: Policies and Procedures Checklist

I have read the entire *Special Event Permit: Policies and Procedures* and understand all the requirements, limitations, policies and procedures that are associated with each section. By initialing the following statements, I completely understand what is expected of me, as the event organizer, and will comply with each corresponding section.

Initial	Certificate of Insurance		City Office Use	Only	
	Trash and Recycling Plan		Application Fee:	<u>\$ 50.00</u>	
	Street Closure Requests – Cones, Can	dlesticks, A-Frames and Barricades	Park Impact Fee:	\$ 100.00	
Initial (Concessionaire and Food Vendor Per	mits and Roster	(\$100 – Required for Events expecting more tha	an 100 attendees)	
Initial	Alcohol Dispensing Requirements and	Limitations	Special Event Refundable Deposit	\$ 500.00	
Initial	Signage Limitations (Temporary Bann	ers, A-Frames, Yard Signs, etc.)	Your \$500 deposit may be used if repairs are re property	quired to any city	
Initial	Route Identifier Markers for Walks, R		Alcohol Dispensing Permit: (\$50.00/Day + 3% of Gross Sales – Only for Eve	\$ nts with alcohol)	
Initial	Community Notification		Facility Rental Fees:	\$	
Initial	Portable Toilets		Equipment Rental Fees:	\$	
Initial			Total Due:	\$	
Initial	Inflatable Structures			<u></u>	
Initial	Entrance Fees and Event Parking		Please email this application	n to the	
Initial	Tournaments, Camps and Competitions		following marked divisions:		
(Initial	Cancellation Policy		☐ Special Event Coordinator☐ Clerk's Office		
			☐ Fire		
			□ Police		
			☐ Streets ☐ Power		
Policies and laid out in tapplication.	 r) have read this entire Special Event Peril I Procedures. I agree to abide by ALL rule he stated document. I have attached all I understand that failure to comply with hts may result in termination of my perm uests. 	es, regulations and requirements required documentation to this n ALL requirements, deadlines and	☐ Legal Authorized City Representa Clerk's Office (Dispensing Permit) Sign:		
	r) understand that I am responsible for th	• .	Date:		
	on of the reserved park area. This permit as defined by the City of Idaho Falls, in a	•	Legal Department (Application Rev	<u>view)</u>	
governing t	he City's Parks and Recreation Departme	nt. I agree that during the use of	Sign:		
	cility, the sponsoring organization will no n in, deny anyone the benefits of, or oth	· · · · · · · · · · · · · · · · · · ·	Date:		
discriminati	ion because of the person's race, religion		Special Event Coordinator (Applie	cation Review)	
gender ider	ntity or national origin.		Sign:		
			Date:		
Event Or	ganizer's Printed Name	Date	Fire Department (Fire Safety Check		
			Sign: Date:		
			Date.		
Event Or	ganizer's Signature	Date	Police Department Cantain - Special Event Dispensing B	ormit	
		J	Captain – Special Event Dispensing P Sign:		
			Date:		
			Special Event Sergeant		



remaining debt to the City of Idaho Falls.

CITY OF IDAHO FALLS STREET DIVISION – LOANER FORM

Name of Person Responsible	e for Equipment:		
Address:		City/State/Zip:	
Phone:	Emai	l:	
Event Name / Company:			
Event Date://	Even	t Location:	
<u>Equipment</u>	Quantity	Replacement Cost	Total Replacement
CANDLESTICKS & BASE		\$50.00 (EACH)	Cost
A-FRAME		\$65.00 (EACH)	
CONES		\$50.00 (EACH)	
SIGN AND STAND		\$300.00 (EACH)	
			TOTAL REPLACEMENT COST
Drop-Off Location:		Pick-Up Location: _	
Signature:		Phone Number: L listed items above. Your refundable dep	posit will be used to cover the
		otal replacement cost exceeds your depos	

Thank You, Street Division Management